MAY 1 8 2004

PART B - FEE(\$) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

24126

7590

02/20/2004

ST. ONGE STEWARD JOHNSTON & REENS, LLC 986 BEDFORD STREET STAMFORD, CT 06905-5619

Note: A certificate of mailing can only be used for domestic mailings of the Fee(3) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Bé	atrice. R. Mazson	(Depositor's nume)
12	amal timeson	(suntrugi 2)
	Hay 18 , 2004	(Date)
IZAD.	ATTORNEY POCKET NO. CO	OMERINAL TION NO

FIRST NAMED INVENTOR APPLICATION NO. FILING DATE 02581-P0383A 06/01/2001 09/872-940 Gerd Bock

TITLE OF INVENTION: TESTING OR SETTING DEVICE FOR A PDD OR PDT SYSTEM, OR FOR TRAINING ON SUCH A SYSTEM AND TISSUE PHANTOM

APPLN. TYPE	SMALL ENTITY	ISSUE FE	E PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	05/20/2004
EXAM	IINER	ART UNI	CLASS-SUBCLASS		
RAEVIS. F	OBERT R	2856	073-865900	_ .	
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page names of up to 3 registered patent agents OR, alternatively, (2) the name firm (having as a member a registered	attorneys or 1 & Reex of a single l attorney or 2	Steward Johnstons LLC
The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			agent) and the names of up to 2 regis attorneys or agents. If no name is list will be printed.		

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Karl Storz GmbH & Co. KG

Germany

		☐ individual	corporation or other private group entity	□ government
4a. The following fec(s) are enclosed:	4b. Payment of Fee(s):			
■ Issue Fec	A check in the amo	unt of the fee(s)	is enclosed.	
N Publication Fee	Payment by credit of	ard. Form PTO-	2038 is attached.	
☐ Advance Order - # of Copies	The Director is her Deposit Account Num	eby authorized ber 19–45]	by charge the required fee(s), or credit any (enclose an extra copy of this	overpayment, to form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) Tous M. Alexan	(Date)	5/18/	10	4
NOTE: The Issue Fee and Publication Fee (if required)	will not be	accented	from a	ממעת

other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

05/18/2004 WABRHAM2 00000148 09872940

01 FC:1501 02 FC:1504

1330.00 OP 300.00 DP

TRANSMIT THIS FORM WITH FEE(S)



St. Onge Steward Johnston & Reens

LLC

986 Bedford Street Stamford Connecticut 06905-5619 (203) 324 6155 **3** (203) 327 1096 **5**

May 18, 2004

SSJR File: 02581-P0383A

Pages 3

Deliver To:

ISSUE FEE

Commissioner for Patents Post Office Box 1450

Alexandria, VA 22313-1450

Fax No:

703 746-4000

From:

Beatrice R. Emerson for

Wesley W. Whitmyer, Jr.

Re:

Serial No. 09/872,940

Testing Or Setting Device For A PDD Or PDT System, Or For Training On

Such A System And Tissue Phantom

Dear Sir or Madam:

Attached is the Issue Fee Transmittal, Part B – Fee(s) Transmittal, and Form PTO-2038 (credit card payment).

Sincerely,

Beatrice R. Emerson bea@ssjr.com

WWW:be Enclosures